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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/618,613 | 07/18/2000 | Max Donath | U11.12-0137 | 9301 |

7590 06/10/2003

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900 Second Avenue South
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EXAMINER

SHAPIRO, LEONID

ART UNIT PAPER NUMBER

2673

DATE MAILED: 06/10/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary

Application No.

09/618,613

Applicant(s)

DONATH ET AL.

Examiner

Leonid Shapiro

Art Unit

2673

All participants (applicant, applicant's representative, PTO personnel):

(1) Leonid Shapiro.

(3) _____.

(2) Brian D. Kaul.

(4) _____.

Date of Interview: 05 June 2003.

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.

If Yes, brief description: _____.

Claim(s) discussed: Claim 1.

Identification of prior art discussed: US patent # 5,414,439 and 6,226,389 B1.

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

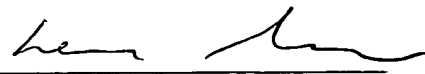
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Claim language for independent claim 1 was discussed in relation to prior art references.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.


BIPIN SHALWALA
SUPERVISORY PATENT EX
TECHNOLOGY CENTER

Examiner Note: You must sign this form unless it is an
Attachment to a signed Office action.


Examiner's signature, if required